

<b>CLAIMS ONLY</b>							SERIAL NO.	FILING DATE					
							APPLICANT(S)						
<b>CLAIMS</b>													
	AS FILED		AFTER 1st AMENDMENT		AFTER 2nd AMENDMENT			*		*		*	
	IND.	DEP.	IND.	DEP.	IND.	DEP.		IND.	DEP.	IND.	DEP.	IND.	DEP.
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TOTAL IND.	21		11					↓		↓		↓	
TOTAL DEP.	24		19					↓		↓		↓	
TOTAL CLAIMS	55		30					↓		↓		↓	

\* MAY BE USED FOR ADDITIONAL CLAIMS OR ADMMENDMENTS